		PART B	- FEE(S)	TRANSMITTAL		1
Complete and send this form, together with applicable fee(s), to: Mai				Commissione P.O. Box 1450	r for Patents) 'irginia 22313-1450	
				PUBLICATION FEE (if fication of maintenance for new correspondence add	required). Blocks 1 through 5 sees will be mailed to the curren tess; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address				napers Each addi	e of mailing can only be used f . This certificate cannot be used tional paper, such as an assignm	for any other accompanying ent or formal drawing, must
23859 75 NEEDLE & ROS SUITE 1000 999 PEACHTREE			I hereby certify th	Certificate of Mailing or transmission. Certificate of Mailing or Transat this Fee(s) Transmittal is being the with sufficient postage for find Mail Stop ISSUE FEE address USPTO (571) 273-2885, on the control of the sufficient postage.	g deposited with the United	
ATLANTA, GA 30309-3915 10/11/2006 CCHAU2 00000032 10690937				Kean J.	DeCarlo	(Depositor's name)
01 FC:1501			October .	3, 2006	(Signature) (Date)	
02 FC:8001 03 FATPLICATION NO.	36.00 OP FILING DATE 00 OF	F	FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/690,937 10/22/2003			James C. Elliott		18111.0021U4	7696
TITLE OF INVENTION: H	IAMMERMILL					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	- NO .	\$1400		\$300	<u>.</u> \$1700	10/06/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Rader Companies Alpharetta, Georgia Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
4a. The following fee(s) are enclosed: A check in the amount of the fee(s) is enclosed. A check in the						
a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the Issue the light of the second status and the second s) 37 CFR 1.27.	☐ b. Applica	ant is no longer claiming S	MALL ENTITY status. See 37 Cously paid issue fee to the applic registered attorney or agent; or t	FR 1.27(g)(2).
interest as shown by the reco	ords of the United States Pate	ent and Trademark	Office.	outer man the applicant; a	registered attorney or agent; or t	ne assignee or other party in
Authorized Signature	10	Date October 3, 2006 Registration No. 39,956				
This collection of informatic an application. Confidential submitting the completed ar this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. oplication form to the USPTG for reducing this burden, shinia 22313-1450. DO NOT \$ 1450.	11. The information 122 and 37 CFR 1 D. Time will vary of ould be sent to the SEND FEES OR C		o obtain or retain a benefit ection is estimated to take on the individual case. An ation Officer, U.S. Patent FORMS TO THIS ADDR	by the public which is to file (an 12 minutes to complete, including y comments on the amount of tigand Trademark Office, U.S. Depters. SEND TO: Commissioner	